

Fe May. 31. 2004 3:42PM Goodwin McKay +403 203 0403

403-529-0 No. 2679 P. 6 p.3

Feb. 18. 2004 11:55AM Goodwin McKay +403 203 0403

No. 1325 P. 2

**COMBINED DECLARATION AND POWER OF ATTORNEY FOR USA PATENT APPLICATION**

(Includes Reference to PCT International Appl.)

Attorney's Docket ID: 2331-001

As below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below adjacent to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **ANTI-REVERSION APPARATUS**

the specification of which:

- is attached hereto,
- was filed as United States Application  
Serial No. \_\_\_\_\_  
on \_\_\_\_\_  
and was amended  
on \_\_\_\_\_ (if applicable)
- was filed as PCT International Application.

**COPY**

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, where priority is not claimed, any foreign application for patent or inventor's certificate, or any PCT International application, having a filing date before that of the application on which priority is claimed. ADDITIONAL APPLICATIONS IDENTIFIED ON ATTACHED SHEET

Prior Foreign Application No.  
As yet unknown

Country  
Canada

Day/Month/Year Filed  
21/01/04

Priority Not Claimed

I hereby claim the benefit under 35 U.S.C. 120 of any U.S. application(s), or 365(e) of any PCT application designating the U.S., listed below, and insofar as the subject matter of each claim of this application is not disclosed in the prior U.S. or PCT application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT filing date of this application. ADDITIONAL APPLICATIONS IDENTIFIED ON ATTACHED SHEET)

U.S. or PCT Parent Application No.

Parent Filing Date (Day/Month/Year)

Parent Patent No. (if applicable)

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint Sean W. Goodwin (Reg. No. 39,368) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send Correspondence to: **GOODWIN MCKAY**  
The Burns Building  
Suite 360, 237 - 8<sup>th</sup> Avenue S.E.  
Calgary, AB T2G 3C3 CANADA

Telephone No.  
403-203-0101

Direct Calls to:  
Sean W. Goodwin

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so-made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1000 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SOLE OR FIRST INVENTOR	Citizenship	CANADIAN
Given Name (first and middle [if any]) <b>KELLY</b>	Family Name or Surname	<b>LIBBY</b>
Full Post Office Address <b>#174, 4000 - 13<sup>th</sup> Avenue S.E., Medicine Hat, Alberta, T1B 1J2, Canada</b>		
Residence - City, State/Country (if different from PO address)		
SIGN AND DATE HERE Inventor's Signature <i>Kelly &amp; Libby</i>	Date	<b>18/02/04</b>
SECOND JOINT INVENTOR (If any)	Citizenship	
Given Name (first and middle [if any])	Family Name or Surname	
Full Post Office Address		
Residence - City, State/Country (if different from PO address)		
SIGN AND DATE HERE Inventor's Signature	Date	
THIRD JOINT INVENTOR (If any)	Citizenship	
Given Name (first and middle [if any])	Family Name or Surname	
Full Post Office Address		
Residence - City, State/Country (if different from PO address)		
SIGN AND DATE HERE Inventor's Signature	Date	

**GOODWIN MCKAY**